

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/421545	FILING DATE		
						APPLICANT(S)			
						CLAIMS			
NO.	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT		NO.	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1			/				51		
2			/				52		
3			/				53		
4			/				54		
5			/				55		
6			/				56		
7			/				57		
8	/		/				58		
9	/		/				59		
10	/		/				60		
11	/		/	/			61		
12	/		/	/			62		
13	/		/	/			63		
14	/		/	/			64		
15	/		/	/			65		
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46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	5		5				TOTAL IND.		
TOTAL DEP.	18		18				TOTAL DEP.		
TOTAL CLAIMS							TOTAL CLAIMS		

PTO-1348 (5-76)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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